

PH00000024502

OFFICE USE ONLY

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

OFFICE USE ONLY

FILED
00 MAR -9 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. BERRASPE CORPORATION
(Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

RECEIVED
00 MAR -9 AM 11:11
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input checked="" type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

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-03/09/00-01062--006
*****78.75 *****78.75

Examiner's Initials

ARTICLES OF INCORPORATION

OF

BERROSPE CORPORATION

The undersigned incorporator(s), for the purpose of forming a Corporation under the Florida General Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

BERROSPE CORPORATION

The principal place of business of this corporation shall be:

1516 WEST 41 STREET HIALEAH FL 33012

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ARTICLE II NATURE OF BUSINESS

This corporation may engage in or transact any or all lawful activities or business permitted under the laws of the United States, the State of Florida, or any other state, country, territory or nation.

ARTICLE III CAPITAL STOCK

The aggregate number of shares of stock and its par value that this corporation is authorized to have outstanding at any one time is: ONE HUNDRED (100)

ARTICLE IV TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V OFFICERS DIRECTORS

The name(s) and street address(es) of the initial officer(s) and director(s), if any, who shall hold office the first year of the corporation's existence or until their successor(s) is (are) elected, is(are):

| | |
|-------------------|---------------------------------------|
| LUCIO BERROSPE | 1516 WEST 41 STREET, HIALEAH FL 33012 |
| MARIA L. BERROSPE | 1516 WEST 41 STREET HIALEAH FL 33012 |
| DANIEL ECHAGUE | 1516 WEST 41 STREET HIALEAH FL 33012 |

ARTICLES VI INCORPORATOR(S)

The name(s) and street address(es) of the Incorporator(s) to these articles of incorporation is(are):

LUCIO BERROSPE 1516 WEST 41 STREET HIALEAH FL 33012
MARIA L. BERROSPE 1516 WEST 41 STREET HIALEAH FL 33012
DANIEL ECHAGUE 1516 WEST 41 STREET HIALEAH FL 33012

IN WITNESS WHEREOF, the undersigned incorporator(s) has have executed these Articles of Incorporation this 6TH day of MARCH, ~~XIX~~ 2000

Signature(s) of Incorporator(s)

[Signature]

PRESIDENT

VICE PRESIDENT DIRECTOR

[Signature]

SECRETARY DIRECTOR

STATE OF FLORIDA
COUNTY OF _____

DADE

THE FOREGOING instrument was acknowledged and sworn to before me this

6TH day of MARCH, ~~XIX~~ 2000 by LUCIO BERROSPE - MARIA L. BERROSPE
(Name of Incorporator)

DANIEL ECHAGUE
of _____

BERROSPE CORPORATION

(Name of Corporation)

[Signature]

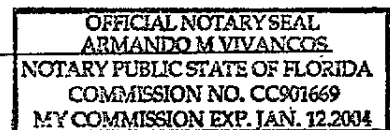
Notary Public



"OFFICIAL NOTARY SEAL"
ARMANDO M VIVANCOS

(SEAL)

My Commission Expires: _____



ARTICLES OF INCORPORATION

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: BERROSPE CORPORATION

2. The name and address of the registered agent and office is:

LUCIO BERROSPE

(NAME)

1516 WEST 41 STREET

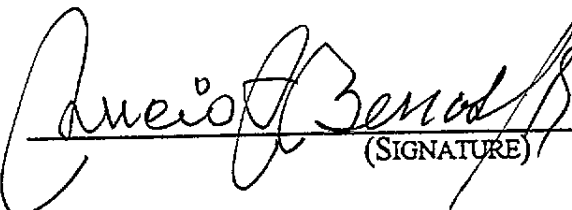
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

HIALEAH FL 33012

(CITY/STATE/ZIP)

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00 MAR -9 PM 2:00
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(SIGNATURE)

03-06-2000

(DATE)